Health sector expansion and healthcare to old people

*322. SHRIMATI MOHSINA KIDWAI: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government is aware that according to FICCI, India would require an investment of 78 billion dollars in the next decade to fund the addition of approximately 10,00,000 beds which are needed;

(b) if so, with meager funding of 1 per cent of GDP on total healthcare system, how Government would achieve this target;

(c) what healthcare system his Ministry is going to evolve for the ageing people and senior citizens having chronic diseases; and

(d) in what manner, Government is going to ensure that old age people get cheaper and accessible medical treatment?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMADOSS): (a) to (d) According to the Study Report of Federation of Indian Chambers of Commerce and Industry (FICCI), India would require an investment of US $ 77.9 billion in the next decade to fund the addition of approximately 10,00,000 beds by 2012. The study further states that the Government and Private Players need to focus on their core competencies/responsibilities, work together to reduce inefficiencies and complement each others efforts.

Presently, the public spending on health as a percentage of GDP is in the vicinity of 1%. The National Common Minimum Programme has mandated that the Government will raise public spending on health to atleast 2-3% of GDP over the next five years with focus on primary healthcare. The strategy being adopted in the Eleventh Plan is likely to enhance the levels of public health spending as a per cent of GDP. This strategy aims at promoting comprehensive primary healthcare under the National Rural Health Mission, develop tertiary healthcare facilities under Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) and concrete measures to arrest HIV/AIDS and other communicable and life style diseases.

The National Policy for Older Persons (NPOP), 1999 mandated separate beds for the elderly at various levels of health Care delivery system. At present, elderly are being provided health care facilities through/as part of general health care delivery system, which is almost free of cost. The Eleventh Five Year Plan envisages implementation of the National Programme for Health Care of the elderly to address the health care needs of the elederly population. It is proposed to establish two National Institutes of Ageing in the country under this programme. These Institutes would be responsible for providing state of the art health care facilities to the elderly in a comprehensive manner. In addition, research and training in the field of Geriatrics/Gerontology would also be undertaken in these Institutes.

Comprehensive specialist/super specialist care in the identified speciality would be provided at the State medical colleges and district hospitals for the elderly. There is also a provision of mobile Medical care for the elderly in the community who are bed ridden/ immobile.

Renewal of Tatkal Scheme

*323. MS. MABEL REBELLO:
SHRI SANTOSH BAGRODIA:

Will the Minister of RAILWAYS be pleased to state:

(a) whether Government has renewed the guidelines for the Tatkal Scheme for reservations;

(b) if so, the details thereof;

(c) whether it is a fact that reservations under this scheme can now be obtained two months in advance against the payment of a premium;

(d) if so, the rationale for such provisions in the scheme; and

(e) what steps are being taken to ensure that the seats are made available to passengers traveling in emergency?

THE MINISTER OF RAILWAYS (SHRI LALU PRASAD): (a) and (b) The Tatkal reservation system has been reviewed from time to time and the following modification has been made in this scheme recently:—

With a view to improve Tatkal utilization in those trains in which the utilization of Tatkal accommodation is less than 50% in sleeper class on an average for the whole financial year and to save the botheration of general wait listed passengers to go to reservation counter again to book berths under Tatkal scheme, instructions have been issued to Zonal Railways that wait listed passengers of such trains should be given an opportunity to opt for booking under Tatkal Quota (upto 50% of total Tatkal quota) at the time of buying their waitlist ticket itself. This scheme has been introduced on an experimental basis for a period of six months.

(c) No, Sir. The reservations under the above mentioned scheme will be confirmed only five days in advance excluding the day of journey.

(d) The scheme has been introduced to save the botheration of general wait listed passengers to go to reservation counter again to book berths under Tatkal scheme and also to optimize the utilisation of Tatkal berths.

(e) The scheme is not likely to affect the normal availability of Tatkal berths as the occupation level of Tatkal quota in trains covered under the scheme is below 50% and only 50% of Tatkal quota has been earmarked for waitlist passengers.

Change in the route of trains

†*324. SHRI AJAY MAROO: Will the Minister of RAILWAYS be pleased to state:

(a) whether the Government of Jharkhand has expressed its displeasure by objecting to the change in the route of different trains or their cancellation by Railways without taking the State Government into confidence, in the name of 'Bandh' of Maoists in the State;

(b) the basis of decision of cancelling of trains of changing their routes; and

(c) at which level is the decision taken in this regard?

THE MINISTER OF RAILWAYS (SHRI LALU PRASAD): (a) The Government of Jharkhand had requested Railway authorities to desist from cancellation/diversion of trains on considerations of law and order without prior consultation with State Government officials whenever Bandhs are called by Left Wing Extremists.

(b) and (c) Based on review of threat perceptions that could possibly endanger life of passengers, Railway personnel and Railway property, General Managers of Zonal Railways

†Original notice of the question was received in Hindi.